

TRICARE Health Care for Puerto Rico
RFP H94002-04-R-0001
Question Set IV

Question 62: C-4.7. Site Security Manager Roles and Responsibilities. Will the SSM be responsible for submitting a DISA form 41 for each associate requesting access to the Government furnished web based access to DEERS information as described in C-4.6.2. Would the answer to this question be different providing the Government provided access for an associate using Government furnished PCs over a Government furnished web interface as apposed to contractor PCs over a contractor provided web interface?

Response: Yes, the SSM is responsible for submitting a DISA form 41 for each associate requesting access to the Government furnished web based access to DEERS Information. The answer remains the same even if the Government provided the equipment and the connection. The DISA form 41 requests permission to access the information in DEERS, regardless of who owns the equipment and communication lines.

Question 63: C-4.7. Site Security Manager Roles and Responsibilities. A reference is made to a security application (“The SSM must always lock his or her PC or close the Security Application each time he or she leaves his or her PC unattended even for a short period.”). Is this application to be Government furnished or Contractor supplied? If this is Government furnished software what are the PC requirements?

Response: Any security application referenced in this section is supplied either within the GIQD or is inherent within the contractors’ own network suite. Either way the SSM would have to appropriately safeguard any access to it including locking it when not in use. In general, the applications provided by the Government only are supported on a Windows NT/2000 platform.

Question 64: C-4.8. The RFP states that “Systems must be scanned and tested using National Security Agency (NSA) and Defense Information Security Agency Guidelines and policies”. Where are these documents and or policies defined? Is there a listing of documents and specific policies that are applicable?

Response: Scanning and testing policies are from National Security Agency (NSA) and Defense Information Security Agency (Guidelines and policies). These policies can be found at website <http://iase.disa.mil> (a list of technical DISA guidelines and policies).

Question 65: Physical Security Matrix and Security Accreditation. Will the contractor be required to achieve a Sensitive Information, (SI) rating for MAC III leading to an IATO or ATO for this contract? If no, are the purple shaded areas in the Physical Security Matrix which applies to DoDI 8500.2 applicable?

Response: All TRICARE contractors' systems are considered MAC III and must be safeguarded appropriately even when the requirement does not result in an IATO or ATO, which is the case with this contract. The physical security audit matrix is a Military Health System requirement and all the line items apply.

Question 66: Are severance costs to be included in the proposed Transition Out CLINS (x004) or will they be negotiated after the termination of the contract?

Response: All compensation to perform the transition-out services, which may include severance in accordance with company procedures, should be included in the transition-out CLINs.

Question 67: Section C-1 states "When medically necessary, the contractor shall provide transportation outside of Puerto Rico." This section appears to imply that the contractor is to incur the actual transportation costs. Section C-4.2.7. of the RFP states "The contractor shall arrange for, coordinate, and schedule medically necessary patient transport." This requirement could be interpreted as the contractor only needs to facilitate, but not actually incur the costs of the transportation. Could the government clarify as to:

- **Are contractors to include estimates of the transportation costs (e.g. airfare) in their proposals?**

RESPONSE: No, the transportation costs are considered a health care cost that will be billed by the contractor to the overseas claims processor.

- **If the transportation costs are to be included in the proposal, is there any historical information available as to the how many such trips and the related costs are anticipated?**

RESPONSE: Not applicable and no historical information is available.

Question 68: Paragraph C-4.4 states that claims processing shall be in accordance with TPM Chapter 12 in accordance with the Global Overseas Remote program.

Throughout Chapter 12, responsibilities/procedures for claims processing for both the TRICARE Global Remote Overseas (TGRO) contractor and for the MCSC Overseas contractor are included. It is assumed that claims processing under this RFP should mirror those included in Chapter 12 for the TGRO. Is this assumption correct? If not, please clarify.

RESPONSE: You are correct.

Question 69: Item 19 in the table in paragraph F-8.1 requires an electronic claim file of network providers to be sent to the "Electronic Claims Provider".

a. Please clarify who the electronic claims provider is and what role they play.

RESPONSE: The reference to "Electronic Claims Provider" should read "claims processor." Foreign claims are included as a component of the TRICARE South Region. The South Region contractor is Humana Military Health Services (HMHS). The winner of this contract must provide HMHS with all information necessary to allow the processing of a claim. The exact data elements and format will be agreed upon between the contractors and the Government during the transition period.

b. Will the file format be specified by the offeror, the "electronic claims provider" or the government?

RESPONSE: The Government anticipates that all parties listed in your question will agree upon the format. However, if agreement cannot be achieved, the Government will mandate the format.

Question 70: Paragraph L-14.4.2.2.8 requires the proposal to provide sufficient information to demonstrate the offeror's ability to deliver those services identified under "Factor 2 – Technical Approach" below. "Factor 2 – Technical Approach" does not appear elsewhere in the RFP. Please clarify.

RESPONSE: This provision will be deleted in an upcoming amendment.

Question 71: The table at F-8.1 includes a column labeled "initial". Several items have the entry "NLT submission of proposal" in initial column.

a. Does that mean these items are to be submitted along with the proposal?

RESPONSE: The chart in F-8.1. will be revised in a subsequent amendment. Offeror's need only submit that information required in Section L with their proposal.

b. If so, are these items to be submitted as part of the proposal or under separate cover?

RESPONSE: Please see previous response.

c. If part of the proposal, where should they be included? Are they included in the 100 page count? Do the format restrictions (i.e. double spaced, one inch margins. etc.) apply?

RESPONSE: Please see previous response.

Question 72: In the TRICARE Policy Manual, Chapter 12, Section 1.1, paragraph II TRICARE Overseas Program (TOP) Management Responsibilities, the responsibilities of the TGRO contractor are discussed (page 3). It states (in part): "Following the delivery of health care and payment to overseas providers, the TGRO contractor shall submit all remote health care claims to the TMA overseas MCSC responsible for processing foreign claims."

a. Under this contract, is the Puerto Rico Healthcare Contractor (PRHC) required to pay the provider and then submit a claim to the MCSC for reimbursement? If yes, is the PRHC reimbursement restricted to the amount paid to the provider?

RESPONSE: Yes, the PRHC must follow the specified Policy Manual provision. And, yes, the PRHC reimbursement amount is strictly limited to the lesser of the amount paid to the provider or the TRICARE maximum reimbursable amount (e.g. DRG, CMAC, etc.).

b. If the provider is paid before the overseas MCSC adjudicates the claim, what actions, aside from attempting recoupments from the provider, can the PRHC take if the overseas MCSC denies payment? Are recoupment activities against providers allowed by the PRHC under policy in Chapter 12, Section 11.1, paragraph V.R.? If so and if recoupment activities are unsuccessful, must the PRHC absorb the loss for the not-at-risk healthcare dollars?

RESPONSE: The PRHC is responsible for ensuring that services delivered and paid by the PRHC are covered benefits, medically necessary and appropriate, provided to an eligible beneficiary, and reimbursable through TRICARE (note that active duty personnel are eligible for services exceeding the “CHAMPUS” benefit). Thus, a denial should only occur based on a retroactive eligibility determination (e.g. the beneficiary is retroactively determined ineligible by DEERS). In this case, the good faith payment procedures may apply leaving no amount to be recouped. If, however, recoupments are necessary, the MCSC will recoup from the PRHC who will base their actions on the terms of their contracts with the providers.

c. There appears to be at least a potential for dispute between contractors regarding medical necessity questions and even eligibility questions since DEERS data changes frequently. If the PRHC and the overseas MCSC disagree regarding the adjudication of a particular claim, will there be a mechanism for arbitration by TMA?

RESPONSE: In this case, the PRHC is acting as a billing agent for the provider. In this role, the appeals process as defined in 32 C.F.R. 199 is applicable.

Question 73: Based on it's exclusion from most other sections of the new TNEX manuals, we assume first 8 processing for Behavioral Health is no longer required, and it's inclusion in TPM 6010.54-M, Chapter 12, Section 10.2, was an oversight. Please confirm or clarify our understanding.

RESPONSE: You are correct. The TPM is being changed.

Question 74: The answer to Question 52 did clarify that there were will not be TSCs required under this contract. However, the question had a few more parts to the question: Section H-4.1 of the RFP requires all services to be performed at a centralized location. Could the Government please clarify this requirement? Does this requirement only refer to services directly involving the eligible population? By necessity, some services will be performed at the contractor's home office. These services would include, but not limited to, contract management, invoicing and the IPT process described in section H-7.

RESPONSE: Section H-4.1. will be deleted by Amendment 0002.